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## APPLICANTS

David G. Abdallah, Akron, OH;

\*\* CONTINUING DATA \*\*\*\*\*

*None*

\*\* FOREIGN APPLICATIONS \*\*\*\*\*

*None*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 11/08/2001

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged Examiner's Signature <u><i>Joseph A. Dese</i></u> Initials _____	STATE OR COUNTRY OH	SHEETS DRAWING 4	TOTAL CLAIMS 34	INDEPENDENT CLAIMS 1
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## ADDRESS

John M Vasuta  
Bridgestone/Firestone Inc  
1200 Firestone Parkway  
Akron , OH  
44317-0001

## TITLE

APPARATUS FOR MAKING REINFORCEMNE TPLY MATERIAL

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